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PATENT APPLICATION
Docket No.: 9051.37

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

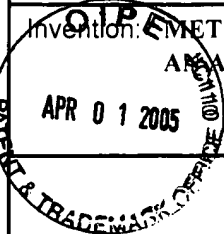
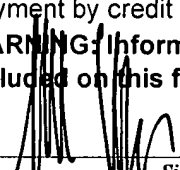
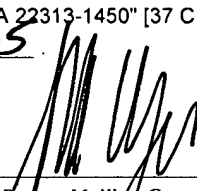
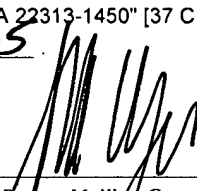
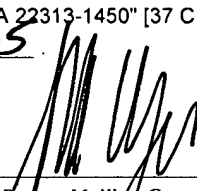
In re application of:)	
	Lynn Y. Shimada)	
Serial No.:	09/345,820)	Art Unit
)	3624
Filed:	June 30, 1999)	
)	
For:	METHOD AND SOFTWARE ARTICLE FOR)	
	SELECTING ELECTRONIC PAYMENT OF)	
	VENDORS IN AN AUTOMATED PAYMENT)	
	ENVIRONMENT)	
)	
Examiner:	Alain L. Bashore)	

AMENDMENT

MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is responsive to the Office Action mailed from the United States Patent and Trademark Office on November 3, 2004. Pursuant to 37 C.F.R. § 1.111, please amend the above-referenced patent application as follows:

AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. 9051.37											
Applicant(s): Lynn Y. Shimada															
Application No. 09/345,820	Filing Date 06/30/99	Examiner Alain L. Bashore	Customer No. 21999	Group Art Unit 3624	Confirmation No. 1703										
Invention: METHOD AND SOFTWARE ARTICLE FOR SELECTING ELECTRONIC PAYMENT OF VENDORS IN AN AUTOMATED PAYMENT ENVIRONMENT															
															
<u>COMMISSIONER FOR PATENTS:</u>															
Transmitted herewith is an amendment in the above-identified application.															
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
The fee has been calculated and is transmitted as shown below.															
CLAIMS AS AMENDED															
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE										
TOTAL CLAIMS	10 -	20 =	0	x \$25.00	\$0.00										
INDEP. CLAIMS	2 -	3 =	0	x \$100.00	\$0.00										
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00										
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00										
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0843 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.															
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.															
 _____ Signature			Dated: Mar. 30, 2005												
Michael F. Krieger Attorney for Applicant Registration No.: 35,232 KIRTON & McCONKIE 60 East South Temple, Suite 1800 Salt Lake City, Utah 84111 Telephone: (801) 321-4814 Fax: (801) 321-4893			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</td> </tr> <tr> <td style="text-align: center;">  (Date) </td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;">Signature of Person Mailing Correspondence</td> </tr> <tr> <td colspan="2" style="text-align: center;">Michael F. Krieger</td> </tr> <tr> <td colspan="2" style="text-align: center;">Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>			I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on		 (Date)		Signature of Person Mailing Correspondence		Michael F. Krieger		Typed or Printed Name of Person Mailing Correspondence	
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 (Date)															
Signature of Person Mailing Correspondence															
Michael F. Krieger															
Typed or Printed Name of Person Mailing Correspondence															
CC:															